| | | | | | | |
|---|---|---|---|---|---|---|
| 29. Delhi | 69.56 | 37.21 | 75.40 | 20.10 | 97.57 | 100.45 |
| 30. Pondicherry | 11.08 | 6.15 | 10.32 | 11.28 | 13.43 | 13.56 |
| 31. A&N Islands | 99.44 | 155.68 | 116.46 | 111.28 | 226.84 | 231.75 |
| 32. Chandigarh | 43.15 | 44.30 | 47.25 | 34.55 | 41.06 | 44.81 |
| 33. D&N Haveli | 24.93 | 24.90 | 25.94 | 34.85 | 40.67 | 18.12 |
| 34. Daman & Diu | 15.80 | 10.08 | 16.42 | 12.97 | 16.08 | 9.90 |
| 35. Lakshadweep | 4.96 | 5.24 | 5.81 | 5.82 | 6.35 | 5.57 |
| TOTAL:— | 12999.20 | 11305.48 | 11210.00 | 10055.84 | 10577.00 | 9524.39 |
| Kalazar | 1000.00 | 1000.00 | 1000.00 | 1000.00 | 1200.00 | 999.98 |
| Estt/Research/ Publicity | 700.80 | 571.10 | 694.00 | 541.35 | 673.00 | 578.75 |
| RAC | 15000.00 | 3517.39 | 12000.00 | 6064.95 | 1000.00 | 8125.89 |
| HDCP | — | — | 100.00 | — | 50.00 | — |
| GRAND TOTAL:— | 29700.00 | 16393.97 | 25000.00 | 17662.14 | 22500.00 | 19229.01 |

**Increase in Mosquitoes**

†1411. SHRI KRIPAL PARMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that mosquitoes causing dengue and malaria are increasing;

(b) if so, whether Government propose to restart spraying of DDT under National Malaria Eradication Programme in view of ineffectiveness of other measures adopted by it;

(c) if so, the details thereof; and

(d) if not, in what manner these mosquitoes would be brought under control?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. THAKUR): (a) Aedes Aegypt mosquito causing Dengue is widespread in different parts of the country, specially in urban areas. Its density increase in conducive and favourable conditions. Density of the Anopheline mosquito, transmitting malaria, increase during the Monsoon or the post-Monsoon season.

(b) to (d) For controlling malaria DDT continues to be used under national Anti Malaria Programme wherever effective and vectors susceptible to this insecticide.

†Original notice of the question was reeceived in Hindi.

Steps taken for control of Malaria and dengue include :—

**MALARIA**

Early case detection and prompt treatment

Selective Vector Control

Promotion of personal protection methods

Early detection and containment of epidemics

Information, Education and Communication towards personal prevention and community participation

Institutional and Management Capacity Building, Trained Manpower Development and efficient Management Information System (MIS)

Issuance of advance warning to States / UTs suggesting all the preventive and control measures

**DENGUE**

Disease and vector surveillance

Vector control mainly through source reduction

Early diagnosis and case management in hospitals

Information, Education and Communication for community awareness

Early response to epidemics

Regular monitoring and review of Dengue situation by the concerned authorities

Deployment of domestic breeding checkers for vector surveillance, source reduction and community education

Development and issue of guidelines to states for prevention and control of Dengue / DHF and containment of outbreaks.

A Control Room has been established at the Directorate of National Anti Malaria Programme, Delhi for closely monitoring the Dengue situation and providing technical guidelines to the States reporting incidence of Dengue.

**Eradication of Malaria**

1412. SHRI RUMANDLA RAMACHANDRAIAH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state: